19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 1 of 52

| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| SOUTHERN DISTRICT OF NEW YORK | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself | | |
|-----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Shelly First name A. Middle name | First name Middle name |
| | Bring your picture identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | Shelly Pettit Shelly Ann Lall-Pettit | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-5544 | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 2 of 52

Debtor 1 Shelly A. Lall-Pettit

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 359 Allview Ave | If Debtor 2 lives at a different address: |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Putnam | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document

| Debtor 1 | Shelly A. Lall-Pettit | Pg 3 of 52 | Case number (if known) | |
|----------|---|------------|------------------------|--|
| Part 2: | Tell the Court About Your Bankruptcy Case | | | |

| aı | 12. Tell the Court About 1 | Toui Da | iliki upicy oc | 130 | | |
|-----|---|---------|----------------------|---|--|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | each, see Notice Required by age 1 and check the appropria | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy te box. |
| | choosing to file under | ■ Ch | apter 7 | | | |
| | | ☐ Ch | apter 11 | | | |
| | | ☐ Ch | apter 12 | | | |
| | | ☐ Ch | apter 13 | | | |
| | | | | | | |
| 8. | How you will pay the fee | | about how yo | ou may pay. Typica attorney is submitt | ally, if you are paying the fee you | ck with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with |
| | | | | | ments. If you choose this opti Official Form 103A). | on, sign and attach the Application for Individuals to Pay |
| | | | I request tha | nt my fee be waive | ed (You may request this option | on only if you are filing for Chapter 7. By law, a judge may, |
| | | | | | | our income is less than 150% of the official poverty line that n installments). If you choose this option, you must fill out |
| | | | | | | cial Form 103B) and file it with your petition. |
| | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | |
| | last 8 years? | ☐ Yes | | | Whon | Coop number |
| | | | District | | When When | Case number |
| | | | District District | | when When | Case number Case number |
| | | | District | | wilen | Case Hullibel |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | |
| | | | Debtor | | | Relationship to you |
| | | | District | | When | Case number, if known |
| | | | Debtor | | | Relationship to you |
| | | | District | | When | Case number, if known |
| 11. | Do you rent your | ■ No. | Go to I | ine 12. | | |
| | residence? | ■ No. | • | | ed an eviction judgment agains | st vou? |
| | | ⊔ res | 5. Has ye | No. Go to line 12. | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | | | | | | Judgment Against You (Form 101A) and file it as part of |
| | | | Ц | this bankruptcy pe | | vaagmont ngamet roa (i omi 1017) and me it as part of |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 4 of 52

| Deb | otor 1 Shelly A. Lall-Pett | it | | Pg 4 of 52 Case number (if known) |
|-----|---|----------|---------------------------|---|
| Par | t 3: Report About Any Bu | sinesses | You Owr | n as a Sole Proprietor |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. |
| | | ☐ Yes. | Name | e and location of business |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | per, Street, City, State & ZIP Code |
| | it to this petition. | | Chec | k the appropriate box to describe your business: |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline | s. If you ir s, cash-f | der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B). |
| | For a definition of small | ■ No. | I am ı | not filing under Chapter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am I Code | iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy . |
| | | ☐ Yes. | I am f | iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Any | Hazardo | ous Property or Any Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | |
| | property that poses or is alleged to pose a threat of imminent and | ☐ Yes. | What is | the hazard? |
| | identifiable hazard to public health or safety? Or do you own any | | If immed | tiate attention is |

property that needs immediate attention?

For example, do you own

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 5 of 52

Debtor 1 Shelly A. Lall-Pettit

Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 6 of 52

| Der | Snelly A. Lall-Pett | π | | Case numi | Dei (II Kriowri) | | | |
|-----|---|-----------------------|--|---|--|--|--|--|
| Par | t 6: Answer These Quest | ions for Re | eporting Purposes | | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you | u owe that are not consumer debts or busing | ess debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chap | ter 7. Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | 7. Do you estimate that after any exempt pro available to distribute to unsecured creditor | operty is excluded and administrative expenses s? | | | |
| | administrative expenses | | ■ No | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | ☐ Yes | | | | | |
| 18. | How many Creditors do | ■ 1-49 | | ☐ 1,000-5,000 | ☐ 25,001-50,000 | | | |
| | you estimate that you owe? | □ 50-99 | | ☐ 5001-10,000 | ☐ 50,001-100,000 | | | |
| | | ☐ 100-19 ☐ 200-9 | | □ 10,001-25,000 | ☐ More than100,000 | | | |
| 19. | How much do you estimate your assets to | \$0 - \$1 | | ☐ \$1,000,001 - \$10 million | \$500,000,001 - \$1 billion | | | |
| | be worth? | | 01 - \$100,000 001 - \$500,000 | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion | | | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | |
| 20. | How much do you estimate your liabilities | □ \$0 - \$5 | 50,000 01 - \$100,000 | ☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion | | | |
| | to be? | | 01 - \$100,000 | □ \$50,000,001 - \$30 million | □ \$10,000,000,001 - \$50 billion | | | |
| | | | 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | |
| Par | t7: Sign Below | | | | | | | |
| For | you | I have ex | amined this petition, and I d | declare under penalty of perjury that the info | ormation provided is true and correct. | | | |
| | | | | er 7, I am aware that I may proceed, if eligible e relief available under each chapter, and I | | | | |
| | | | | d not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b). | not an attorney to help me fill out this | | | |
| | | I request | relief in accordance with th | e chapter of title 11, United States Code, sp | pecified in this petition. | | | |
| | | bankrupto and 3571 | cy case can result in fines u | ent, concealing property, or obtaining money up to \$250,000, or imprisonment for up to 20 | or property by fraud in connection with a pyears, or both. 18 U.S.C. §§ 152, 1341, 1519, | | | |
| | | Shelly A | y A. Lall-Pettit A. Lall-Pettit of Debtor 1 | Signature of Deb | tor 2 | | | |
| | | Executed | on April 5, 2019 | Executed on | | | | |
| | | | MM / DD / YYYY | | M / DD / YYYY | | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 7 of 52

Debtor 1 Shelly A. Lall-Pettit Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Francis J. O'Reilly | Date | April 5, 2019 |
|--|---------------|----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Francis J. O'Reilly | | |
| Printed name | | |
| Francis J. O'Reilly Esq. | | |
| Firm name | | |
| 1961 Route 6 | | |
| Carmel, NY 10512 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (845) 225-5800 | Email address | foreilly@verizon.net |
| 2271237 NY | | |
| Bar number & State | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document

| | | | 1 4 0 01 32 | |
|---------------------|--------------------------|-------------------|-------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Shelly A. Lall-Pet | tit | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number _ | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pa | t 1: Summarize Your Assets | | |
|----|---|-------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 206,500.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 18,395.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 224,895.00 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | iabilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 364,656.12 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 55,073.82 |
| | Your total liabilities | \$ | 419,729.94 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 8,623.16 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 8,674.00 |
| Pa | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | — Vous dates are unique efficiency and the O | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 9 of 52 Case number (if known)

Debtor 1 Shelly A. Lall-Pettit

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

8,101.59 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim |) |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document

| | | -9 | | | Pa 10 of 52 | | | |
|--|--|-----------------------------------|---|------------------------|---|---|---------------------|--|
| Fill in | this informatio | n to identify | your case and th | is filinç | g: | | | |
| Debto | r 1 S | helly A. La | II-Pettit | | | | | |
| 5 | | st Name | Middle | Name | Last Name | | | |
| Debto (Spouse | | st Name | Middle | Name | Last Name | | | |
| United | d States Bankrup | tcy Court for | the: SOUTHER | N DIST | RICT OF NEW YORK | | | |
| Case | number | | | | | | | Check if this is an amended filing |
| Scł | cial Form nedule <i>F</i> | VB: Pr | operty | | | | | 12/15 |
| hink it nforma | fits best. Be as on ation. If more space r every question. | complete and a ce is needed, a | accurate as possibl attach a separate sl | e. If two neet to t | tonly once. If an asset fits in more than on married people are filing together, both are his form. On the top of any additional page | e equally responsible t | or supp | lying correct |
| _ | lo. Go to Part 2. | property? | | | | | | |
| 1.1 | | | | What | t is the property? Check all that apply | | | |
| 359 Allview Ave Street address, if available, or other description | | cription | | the amount of any se | t deduct secured claims or exemptions. Put nount of any secured claims on Schedule D: ors Who Have Claims Secured by Property. | | | |
| _ | Brewster Dity | NY State | 10509-3410 ZIP Code | | Land | Current value of th entire property? \$413,000. | | Current value of the portion you own? \$206,500.00 |
| | nty | State | ZIF COUG | | Timeshare Other has an interest in the property? Check one | Describe the nature | e of you , tenan | r ownership interest cy by the entireties, or |
| | | | | | • | | | |
| F | Putnam | | | | Debtor 2 only | | | |

Official Form 106A/B Schedule A/B: Property page 1

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 11 of 52

| Kah Street | nana Villa t address, if available, or other description | · | here: What is the property? Check all that apply Single-family home | | |
|--------------------|---|------------------|---|--|--|
| Kah Street | nana Villa t address, if available, or other descr aina HI | · | What is the property? Check all that apply | | |
| Street | t address, if available, or other descri | iption | _ Single-family home | | |
| Laha | aina HI | iption | | Do not deduct secured cla | |
| | | | ☐ Duplex or multi-unit building | the amount of any secure Creditors Who Have Clair | |
| | | | ☐ Condominium or cooperative | | |
| | | | | Ourselve of the | Command oralize of the |
| City | State | 96761-0000 | ☐ Land | Current value of the entire property? | Current value of the portion you own? |
| | | ZIP Code | ☐ Investment property | \$0.00 | \$0.00 |
| | | | Timeshare | December the metions of | |
| | | | ☐ Other | Describe the nature of y (such as fee simple, ten | our ownersnip interest ancy by the entireties, or |
| | | | Who has an interest in the property? Check one | a life estate), if known. | |
| | _ | | Debtor 1 only | Joint tenant | |
| Mau | | | Debtor 2 only | | |
| County | ty | | Debtor 1 and Debtor 2 only | ☐ Check if this is con | nmunity property |
| | | | At least one of the debtors and another | (see instructions) | |
| | | | Other information you wish to add about this ite property identification number: | m, such as local | |
| pages art 2: De | s you have attached for P escribe Your Vehicles wn, lease, or have legal or | art 1. Write tha | for all of your entries from Part 1, including any at number hereentries from Part 1, including any at number hereentries from Part 1, including any at number hereentries from Part 1, including any at number 1, including a | ed or not? Include any v | \$206,500.00 ehicles you own that |
| □ No ■ Yes | | | | | |
| 3.1 Mal | ke: Toyota | | Who has an interest in the property? Check one | Do not deduct secured of | aims or exemptions. Put ed claims on Schedule D: |
| Mod | del: Highlander | | Debtor 1 only | | ims Secured by Property. |
| Yea | ar: 2010 | | Debtor 2 only | Current value of the | Current value of the |
| App | proximate mileage: | 80,000 | Debtor 1 and Debtor 2 only | entire property? | |
| Oth | ner information: | | At least one of the debtors and another | | portion you own? |
| | average condition | | | | portion you own? |

Official Form 106A/B

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 12 of 52 Debtor 1 Shelly A. Lall-Pettit Case number (if known) 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe..... \$2,000.00 Furniture and home goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$400.00 Cellphone; laptop; televisions; tablet 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$800.00 Woman's clothing Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No

12. Jewelry

Yes. Describe.....

Costume Jewelry

Wedding Ring

13. Non-farm animals

Examples: Dogs, cats, birds, horses

□ No

Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

□ No

Yes. Give specific information.....

Hamster; dog; cat

\$30.00

\$500.00

\$6,000.00

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 13 of 52

| Debtor 1 | Shelly A. Lall-Pettit | Py 13 01 52 | Case number (if known) | |
|------------------|---|---|----------------------------------|---|
| | Deck furniture | | | \$75.00 |
| | Two grills and a gene | prator | | \$700.00 |
| | i wo gillis and a gene | a a co | | Ψ100.00 |
| | the dollar value of all of your entries from Part 3. Write that number here | | ges you have attached | \$10,505.00 |
| Part 4: De | escribe Your Financial Assets | | | |
| Do you o | wn or have any legal or equitable interest | in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | aples: Money you have in your wallet, in your | | and when you file your petition | |
| ■ Yes. | | | Cash | \$40.00 |
| | sits of money nples: Checking, savings, or other financial ac | | in credit unions, brokerage ho | uses, and other similar |
| □ No ■ Yes. | institutions. If you have multiple accour | Institution name: | | |
| | 17.1. Checking acc | ount Hudson Valley Federal C | Credit Union | \$50.00 |
| Exam ■ No | s, mutual funds, or publicly traded stocks ipples: Bond funds, investment accounts with l | | nts | |
| 19. Non-p | oublicly traded stock and interests in incolventure | porated and unincorporated busine | esses, including an interest i | n an LLC, partnership, and |
| ■ No | . Give specific information about them Name of entity: | | % of ownership: | |
| Nego | rnment and corporate bonds and other ne tiable instruments include personal checks, on egotiable instruments are those you cannot | ashiers' checks, promissory notes, and | d money orders. | |
| | . Give specific information about them Issuer name: | | | |
| | ement or pension accounts apples: Interests in IRA, ERISA, Keogh, 401(k) | , 403(b), thrift savings accounts, or oth | er pension or profit-sharing pla | ans |
| ☐ Yes. | . List each account separately. Type of account: | Institution name: | | |
| Your | ity deposits and prepayments share of all unused deposits you have made opples: Agreements with landlords, prepaid rer | | | s, or others |
| _ | | Institution name or individual: | : | |

Official Form 106A/B Schedule A/B: Property page 4

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 14 of 52 Shelly A. Lall-Pettit Debtor 1 Case number (if known) 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Trans America** Spouse \$1.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 15 of 52 Shelly A. Lall-Pettit Debtor 1 Case number (if known) ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$91.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$206,500.00 56. Part 2: Total vehicles, line 5 \$7,799.00 57. Part 3: Total personal and household items, line 15 \$10,505.00 58. Part 4: Total financial assets, line 36 \$91.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$18,395.00 Copy personal property total \$18,395.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$224,895.00

Official Form 106A/B Schedule A/B: Property page 6

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document
Pa 16 of 52

| Fill in this infor | Fill in this information to identify your case: | | | | | | | | |
|---------------------|---|-------------------|-------------|--|--------------------------------------|--|--|--|--|
| Debtor 1 | Shelly A. Lall-Pet | tit | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 | | | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | | | | | |
| Case number | | | | | — 0 | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing | | | | |
| (ii Kilowii) | | | | | _ | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the Property | You Claim | as Exempt |
|---------|----------|--------------|-----------|-----------|
|---------|----------|--------------|-----------|-----------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|---|--------------------------------------|-----------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| 359 Allview Ave Brewster, NY 10509-3410 Putnam County | \$206,500.00 | | \$25,671.94 | NYCPLR § 5206 |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Furniture and home goods Line from Schedule A/B: 6.1 | \$2,000.00 | | \$2,000.00 | NYCPLR § 5205(a)(5) |
| Ellie Holli Gonedule 74 B. G.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Cellphone; laptop; televisions; table | \$400.00 | | \$400.00 | NYCPLR § 5205(a)(5) |
| Line from Schedule A.B. 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Woman's clothing Line from Schedule A/B: 11.1 | \$800.00 | | \$800.00 | NYCPLR § 5205(a)(5) |
| Ellic IIom Scriedule A/B. 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| Costume Jewelry Line from Schedule A/B: 12.1 | \$500.00 | | \$500.00 | NYCPLR § 5205(a)(6) |
| Line nom <i>Schedule AVD</i> . 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 17 of 52

Debtor 1 Shelly A Lall-Pettit

Case number (if known)

| De | Sileny A. Lan-Fettit | | | | |
|----|--|--------------------------------------|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Wedding Ring Line from Schedule A/B: 12.2 | \$6,000.00 | | \$6,000.00 | NYCPLR § 5205(a)(6) |
| | Line Horr Schedule A/B. 12.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Hamster; dog; cat Line from Schedule A/B: 13.1 | \$30.00 | | \$30.00 | NYCPLR § 5205(a)(4) |
| | Line from Schedule A/B. 13.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every | | | led on or after the date of adjustmer | nt.) |
| | ☐ Yes. Did you acquire the property cove | red by the exemption wi | ithin 1 | ,215 days before you filed this case | ? |
| | □ No | | | | |
| | | | | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document

| | | Pu 10 UI 52 | | | |
|--|-----------------------|---|-----------------------------------|--|-----------------------------|
| Fill in this information to ide | entify your ca | ase: | | | |
| Debtor 1 Shelly A | A. Lall-Petti | | | | |
| Debtor 2 | | Middle Name Last Name | | | |
| (Spouse if, filing) First Name | | Middle Name Last Name | | | |
| United States Bankruptcy Cou | urt for the: | SOUTHERN DISTRICT OF NEW YORK | | | |
| Case number (if known) | | | | | if this is an led filing |
| Official Form 106D | | | | | |
| | ditors W | /ho Have Claims Secur | ed by Property | | 12/15 |
| | | o married people are filing together, both are number the entries, and attach it to this form | | | |
| 1. Do any creditors have claims | secured by you | ur property? | | | |
| ☐ No. Check this box and | d submit this f | orm to the court with your other schedules | . You have nothing else to | report on this form. | |
| Yes. Fill in all of the inf | | • | · · | • | |
| | | vv. | | | |
| Part 1: List All Secured C | | | . Column A | Column B | Column C |
| for each claim. If more than one of | creditor has a pa | e than one secured claim, list the creditor separa articular claim, list the other creditors in Part 2. A order according to the creditor's name. | Amount of claim Do not deduct the | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Chase Mortgage | De | escribe the property that secures the claim: | \$238,145.27 | \$413,000.00 | \$0.00 |
| Creditor's Name | | 59 Allview Ave Brewster, NY 0509-3410 Putnam County | | | |
| Number, Street, City, State & Zip Who owes the debt? Check on | ip Code | of the date you file, the claim is: Check all that bly. Contingent Unliquidated Disputed | | | |
| _ | _ | ature of lien. Check all that apply. | | | |
| ■ Debtor 1 only □ Debtor 2 only | - | An agreement you made (such as mortgage or car loan) | secured | | |
| Debtor 1 and Debtor 2 only | | Statutory lien (such as tax lien, mechanic's lien) |) | | |
| ☐ At least one of the debtors and | d another $\ \square$ | Judgment lien from a lawsuit | | | |
| Check if this claim relates to community debt | о а 🗆 | Other (including a right to offset) | | | |
| Date debt was incurred | | Last 4 digits of account number | | | |
| 2.2 Hudson Valley FCU | De | escribe the property that secures the claim: | \$123,510.85 | \$413,000.00 | \$123,510.85 |
| Creditor's Name | | 59 Allview Ave Brewster, NY 0509-3410 Putnam County | | | |
| Post Office Box 107 Poughkeepsie, NY 12602-1071 | '1 As | of the date you file, the claim is: Check all that oly. Contingent | | | |
| Number, Street, City, State & Zip | | Unliquidated Disputed | | | |
| Who owes the debt? Check on | | n Disputed Sture of lien. Check all that apply. | | | |
| Debtor 1 only | | An agreement you made (such as mortgage or | secured | | |
| Debtor 2 only | _ | car loan) | Joouleu | | |
| Debtor 1 and Debtor 2 only | | Statutory lien (such as tax lien, mechanic's lien) |) | | |
| At least one of the debtors and | d another | Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to community debt | | Other (including a right to offset) | | | |
| Date debt was incurred | | Last 4 digits of account number 010 | 0 | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 19 of 52

| Debtor 1 Shelly A. Lall-Pettit | | Case number (if known) | | | |
|---|--|--|-----------------------|-------------|--|
| First Name Middle N | lame Last Name | _ | | | |
| 2.3 Kahana Villa | Describe the property that secures the claim: | \$3,000.00 | \$0.00 | \$3,000.00 | |
| Creditor's Name | Kahana Villa Lahaina, HI 96761 | | | | |
| | Maui County | | | | |
| 4242 Lower Honoapiilani Rd | As of the date you file, the claim is: Check all that apply. | J | | | |
| Lahaina, HI 96761 | ☐ Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | An agreement you made (such as mortgage or car loan) | secured | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien |) | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | • | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | | |
| Date debt was incurred | Last 4 digits of account number | 1 | | | |
| Add the dollar value of your entries in C | Column A on this page. Write that number here: | \$364,656.12 | | | |
| If this is the last page of your form, add Write that number here: | the dollar value totals from all pages. | \$364,656.12 | | | |
| Part 2: List Others to Be Notified for | or a Debt That You Already Listed | | | | |
| trying to collect from you for a debt you o | ne notified about your bankruptcy for a debt that yowe to someone else, list the creditor in Part 1, and tyou listed in Part 1, list the additional creditors less page. | nd then list the collection agency h | ere. Similarly, if yo | u have more | |
| Name, Number, Street, City, State & Hudson Valley FCU | Zip Code On v | which line in Part 1 did you enter the | creditor? 2.2 | | |
| 9 Mall Plaza 1810 South Rd, Suite 121 Wappingers Falls, NY 1259 | | t 4 digits of account number | _ | | |

| | 10 000 | - rogin boo | I Head | Pa 20 of 52 | #/00/10 10.E-1.00 | Main Bo | dament |
|--------------------------------|---|---|---|---|---|----------------------------------|---|
| Fill | in this inform | ation to identify your | case: | 0 20 01 02 | | | |
| Deb | tor 1 | Shelly A. Lall-Pet | tit | | | | |
| | | First Name | Middle Name | Last Name | | | |
| | tor 2 | First Name | Middle Name | LastMana | | | |
| | use if, filing) | First Name | | Last Name | | | |
| Unit | ed States Ban | kruptcy Court for the: | SOUTHERN DIS | STRICT OF NEW YORK | | | |
| Cas | e number | | | | | | |
| (if kno | own) | | | | | _ | heck if this is an |
| | | | | | | an | nended filing |
| Off | icial Form | 106E/F | | | | | |
| | | | ho Have Ur | secured Claims | | | 12/15 |
| Sche Sche left. <i>I</i> | dule G: Executo dule D: Creditor Attach the Conti and case num | ory Contracts and Unexprs Who Have Claims Sec inuation Page to this pag ber (if known). | ired Leases (Officia ured by Property. If ge. If you have no in | I Form 106G). Do not include more space is needed, copy to | contracts on Schedule A/B: Pro any creditors with partially se- the Part you need, fill it out, nu do not file that Part. On the top | cured claims t umber the enti | that are listed in ries in the boxes on the |
| | | of Your PRIORITY Ur | | | | | |
| | _ ′ | s have priority unsecure | d claims against yo | u? | | | |
| | No. Go to Pa | ırt 2. | | | | | |
| | Yes. | (V NONDOLODITA | 2411 | | | | |
| | | of Your NONPRIORIT | | | | | |
| | _ ` | s have nonpriority unsec | _ | | | | |
| | | e nothing to report in this p | art. Submit this form | to the court with your other sche | edules. | | |
| | Yes. | | | | | | |
| | unsecured claim | , list the creditor separatel | y for each claim. For | each claim listed, identify what t | holds each claim. If a creditor ype of claim it is. Do not list clain three nonpriority unsecured clai | ns already incl | uded in Part 1. If more |
| | | | | | | | Total claim |
| 4.1 | Barclays | 5 | Las | t 4 digits of account number | 2449 | | \$2,500.00 |
| | | Creditor's Name | Who | en was the debt incurred? | | _ | |
| | PO Box ² Philadeli | 1333 <i>1</i> phia, PA 19101-333 | | en was the debt incurred? | | | |
| | Number Str | eet City State Zip Code | | of the date you file, the claim i | s: Check all that apply | | |
| | Who incurr | red the debt? Check one. | | | | | |
| | Debtor 1 | 1 only | | Contingent | | | |
| | Debtor 2 | 2 only | | Jnliquidated | | | |
| | Debtor 1 | 1 and Debtor 2 only | | Disputed | | | |
| | ☐ At least | one of the debtors and an | 011101 | e of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check in debt | f this claim is for a com | illullity | Student loans | ration agreement or divorce that | tuou did not | |
| | | n subject to offset? | | Obligations arising out of a sepa ort as priority claims | ration agreement or divorce that | . you aid not | |
| | ■ No | | | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | ☐ Yes | | | Other. Specify Consumer | Debt | | |
| | | | _ ` | | | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document
Pg 21 of 52
Case number (if known)

| Debtor | 1 Shelly A. Lall-Pettit | Case number (if known) | |
|--------|--|---|------------|
| 4.2 | Barclays Bank Delaware | Last 4 digits of account number 4090 | \$3,200.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | LL Bean 100 West Street | when was the debt incurred? | |
| | Wilmington, DE 19801 | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Consumer Debt | |
| 4.3 | Chase | Last 4 digits of account number 1342 | \$3,587.00 |
| | Nonpriority Creditor's Name | | <u> </u> |
| | PO Box 15298 | When was the debt incurred? | |
| | Wilmington, DE 19850-5298 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the claim is. Offect all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | _ | | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | Check if this claim is for a community | _ | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □ Yes | Other. Specify Consumer Debt | |
| | | Cities: Specify | |
| 4.4 | Home Depot (p) | Last 4 digits of account number 2426 | \$600.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | Citibank NA 701 East 60th Street North | when was the debt incurred? | |
| | Sioux Falls. SD 57117 | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Consumer Debt | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document
Pg 22 of 52
Case number (if known)

| Debtor | 1 Shelly A. Lall-Pettit | Case number (if known) | |
|--------|--|---|------------|
| 4.5 | Kohl's Nonpriority Creditor's Name | Last 4 digits of account number 0011 | \$1,300.00 |
| | PO Box 3043 | When was the debt incurred? | |
| | Milwaukee, WI 53201-3043 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □ Yes | Other. Specify Consumer Debt | |
| 4.6 | Macy DSNB | Last 4 digits of account number 2719 | \$2,900.00 |
| | Nonpriority Creditor's Name PO Box 8218 | When was the debt incurred? | |
| | Mason, OH 45040 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | The control and year may and stammer of check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Consumer Debt | |
| 4.7 | NYG&E | Last 4 digits of account number 9696 | \$42.00 |
| | Nonpriority Creditor's Name | | |
| | 535 Connecticut Ave 6th Floor | When was the debt incurred? | |
| | Norwalk, CT 06854 | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ■ No | | |
| | Yes | ■ Other. Specify Utility Service | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document
Pg 23 of 52
Case number (if known)

| Debtor | Shelly A. Lall-Pettit | Case number (if known) | |
|----------|--|--|------------|
| 4.8 | Synchrony Bank | Last 4 digits of account number 1357 | \$1,200.00 |
| | Nonpriority Creditor's Name PO Box 960061 | When was the debt incurred? | |
| | Orlando, FL 32896-0061 | When was the dept incurred: | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Consumer Debt | |
| 4.9 | Synchrony Bank - JC Penney Nonpriority Creditor's Name | Last 4 digits of account number 3491 | \$1,400.00 |
| | PO Box 960061 | When was the debt incurred? | |
| | Orlando, FL 32896-0061 | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | □ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Consumer Debt | |
| | | — Officer, Specify | |
| 4.1 0 | Synchrony Bank - Pearle Vision | Last 4 digits of account number | \$1,300.00 |
| | Nonpriority Creditor's Name PO Box 960061 Orlando, FL 32896-0061 | When was the debt incurred? | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | lacktriangle Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Consumer Debt | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 24 of 52

| Depto | Shelly A. Lall-Pettit | Case number (if known) | |
|-------|--|--|-------------|
| 4.1 | Synchrony Bank - Toys R Us | Last 4 digits of account number 9653 | \$2,750.00 |
| | Nonpriority Creditor's Name PO Box 960061 | When was the debt incurred? | |
| | Orlando, FL 32896-0061 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | <u></u> | Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Consumer Debt | |
| 4.1 | Wells Fargo Bank NA | Last 4 digits of account number 0001 | \$22,794.82 |
| | Nonpriority Creditor's Name PO Box 95225 | When was the debt incurred? | |
| | Albuquerque, NM 87199-5225 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify Personal Loan | |
| 4.1 | Wells Fargo Card Services | Last 4 digits of account number 1246 | \$11,500.00 |
| 3 | Nonpriority Creditor's Name PO Box 10347 | When was the debt incurred? | Ψ11,300.00 |
| | Des Moines, IA 50306-0347 | - A control of the state of the | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | | |
| | □ res | Other. Specify Consumer Debt | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 25 of 52

| Debtor 1 Shelly A. Lall-Pettit | | Case number (if known) | |
|--|---|--|--|
| Allied Interstate P.O. Box 361445 Columbus, OH 43236 | Line 4.10 of (<i>Check one</i>): | □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Columbus, On 43230 | Last 4 digits of account number | 7196 | |
| Name and Address Alltran Financial, LP PO Box 4044 Concord, CA 94524-4044 | On which entry in Part 1 or Part 2 or Line 4.4 of (Check one): Last 4 digits of account number | iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 4370 | |
| Name and Address Barclays PO Box 13337 Philadelphia, PA 19101-3337 | On which entry in Part 1 or Part 2 or Line 4.2 of (Check one): | | |
| • ' | Last 4 digits of account number | 4090 | |
| Name and Address Capital Management Services, L 698 1/2 South Ogden Street Buffalo, NY 14206-2317 | On which entry in Part 1 or Part 2 or Line 4.1 of (Check one): Last 4 digits of account number | lid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 2449 | |
| Name and Address Citi Cards PO Box 790345 Saint Louis, MO 63179-0345 | On which entry in Part 1 or Part 2 or Line 4.4 of (<i>Check one</i>): Last 4 digits of account number | lid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 2426 | |
| Name and Address Credit Control, LLC PO Box 31179 Tampa, FL 33631 | On which entry in Part 1 or Part 2 or Line 4.6 of (<i>Check one</i>): Last 4 digits of account number | lid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 1349 | |
| Name and Address Midland Funding LLC PO Box 301030 Los Angeles, CA 90030-1030 | On which entry in Part 1 or Part 2 of Line 4.9 of (Check one): Last 4 digits of account number | | |
| Name and Address Portfolio Recovery Assc., LLC 120 Corporate Blvd. Norfolk, VA 23502 | On which entry in Part 1 or Part 2 of Line 4.10 of (Check one): Last 4 digits of account number | lid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 1357 | |
| Name and Address Synchrony Bank /JCP PO Box 965009 Orlando, FL 32896-0090 | On which entry in Part 1 or Part 2 of Line 4.9 of (Check one): Last 4 digits of account number | lid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 3491 | |
| Name and Address Tenaglia & Hunt, PA 395 W. Passaic Street, Suite 2 Rochelle Park, NJ 07662 | On which entry in Part 1 or Part 2 or Line 4.12 of (Check one): Last 4 digits of account number | iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 2018 | |
| Name and Address U.S. Gas & Electric PO Box 10162 Uniondale, NY 11555-0162 | On which entry in Part 1 or Part 2 or Line 4.7 of (Check one): Last 4 digits of account number | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | |
| Name and Address United Collection Bureau 5620 Southwark Blvd, Ste. 206 | On which entry in Part 1 or Part 2 of Line 4.3 of (Check one): | lid you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims | |

Official Form 106 E/F

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 26 of 52

Debtor 1 Shelly A. Lall-Pettit

Case number (if known)

Toledo, OH 43614

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

5128

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | - | Total Claim |
|--------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 0.00 |
| claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 55,073.82 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 55,073.82 |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|-----------------------|
| Debtor 1 | Shelly A. Lall-Pet | tit | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number | whom you have the , Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| | | | | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 28 of 52

| | | | Pu 20 01 52 | | |
|--|---|--|---|--|---|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Shelly A. Lall-Pet | tit | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filir | ng) First Name | Middle Name | Last Name | | |
| United Sta | tes Bankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | |
| Case numl | her | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| | | | | | amended ming |
| Officia | l Form 106H | | | | |
| Sched | lule H: Your Cod | ebtors | | | 12/15 |
| Arizon No. Yes 3. In Colin line Form | hin the last 8 years, have you as, California, Idaho, Louisiana, Go to line 3. S. Did your spouse, former spoudumn 1, list all of your codebte 2 again as a codebtor only in | Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran | erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make | ington, and Wisconsin.) if your spouse is filing sure you have listed the | y states and territories include g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| (| Column 1: Your codebtor Name, Number, Street, City, State and ZI | P Code | | Column 2: The cre | editor to whom you owe the debt |
| | , , , , , | | | | , |
| 3.1 | Name | | | _ □ Schedule D, line □ Schedule E/F, I | |
| | | | | ☐ Schedule E, F, I | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 29 of 52

| Fil | I in this information to identify you | r case: | | | |
|------|--|--|---|------------------------|-----------------------------------|
| De | Shelly A. | Lall-Pettit | | | |
| 1 ' | ebtor 2 | | | | |
| Ur | nited States Bankruptcy Court for | the: SOUTHERN DISTRI | CT OF NEW YORK | | |
| 1 | ase number known) | Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date: | | | |
| C | Official Form 106I | | | MM / DD/ Y | YYY |
| S | chedule I: Your In | come | | | 12/15 |
| atta | | n. On the top of any addit | rith you, do not include informati ional pages, write your name an | , , | • |
| • | information. | | Debtor 1 | | or non-filing spouse |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | ☐ Emplo | |
| | information about additional employers. | | ☐ Not employed | ■ Not er | mployed |
| | Include part-time, seasonal, or | Occupation | Administrative Assistant | | |
| | self-employed work. | Employer's name | ELC Management LLC | | |
| | Occupation may include stude or homemaker, if it applies. | nt Employer's address | 125 Pinelawn Road Melville, NY 11747 | | |
| | | How long employed t | there? 8 Months | | |
| Pa | Give Details About | Ionthly Income | | | |
| | timate monthly income as of the buse unless you are separated. | e date you file this form. If | you have nothing to report for any | line, write \$0 in the | space. Include your non-filing |
| | ou or your non-filing spouse have re space, attach a separate shee | | ombine the information for all empl | oyers for that perso | n on the lines below. If you need |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse |

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

| | | | non- | ming spouse |
|----|-----|----------|------|-------------|
| 2. | \$ | 9,158.32 | \$ | 0.00 |
| 3. | +\$ | 0.00 | +\$ | 0.00 |
| 4. | \$ | 9,158.32 | \$ | 0.00 |

Official Form 106I Schedule I: Your Income page 1

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 30 of 52

| | | | For | Debtor 1 | | Debtor 2 or filing spouse |
|--------------------|--|------------|-----------|---------------|----------|---------------------------|
| Copy | line 4 here | 4. | \$ | 9,158.32 | \$ | 0.00 |
| 1.1-4-1 | | | | <u> </u> | | |
| | l payroll deductions: | _ | _ | | _ | |
| | Tax, Medicare, and Social Security deductions | 5a. | \$_ | 2,006.26 | \$ | 0.00 |
| | Mandatory contributions for retirement plans | 5b. | \$_ | 0.00 | \$ | 0.00 |
| | Voluntary contributions for retirement plans | 5c. | \$_ | 0.00 | \$ | 0.00 |
| | Required repayments of retirement fund loans | 5d. | \$_ | 0.00 | \$ | 0.00 |
| | Insurance | 5e. 5f. | \$ \$ | 0.00 | \$ | 0.00 |
| | Domestic support obligations Union dues | 5g. | \$ | 0.00 | \$ | 0.00 0.00 |
| 0 | Other deductions. Specify: Disability NY | 5h.+ | · — | | + \$ | 0.00 |
| | | _ 511.+ | \$_ | 36.44 | 「¥— | 0.00 |
| _ | NY Paid Family Leave Dental | _ | \$ | 76.61 | \$— | 0.00 |
| _ | Medical | _ | \$ - | 280.89 | \$— | 0.00 |
| _ | Voluntary ADD | _ | \$_ | 0.43 | \$ | 0.00 |
| _ | PX 401K | _ | \$- | 167.57 | \$ | 0.00 |
| _ | Accident Protect | _ | \$- | 5.42 | \$ | 0.00 |
| _ | Critical Illness | _ | \$_ | 32.11 | \$ | 0.00 |
| | Vision | _ | \$_ | 14.21 | \$ | 0.00 |
| | Voluntary Life | _ | \$_ | 10.83 | \$ | 0.00 |
| _ | Before tax life insurance | _ | \$ | 24.01 | \$ | 0.00 |
| - Add th | ne payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | \$ | 2,657.16 | \$ | 0.00 |
| | late total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ _ | 6,501.16 | \$ | 0.00 |
|) | profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$_ | 0.00 | \$ | 0.00 |
| 8c. | Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8b. 8c. | \$_ \$ | 0.00 | \$ \$ | 0.00 |
| | Unemployment compensation | 8d. | \$ | 0.00 | \$ | 0.00 |
| 8e. | Social Security | 8e. | \$_ | 0.00 | \$ | 2,122.00 |
| | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | 0.00 |
| J | Pension or retirement income | 8g. | φ | 0.00 | | 0.00 |
| 8h. (| Other monthly income. Specify: | _ 8h.+ | \$_ | 0.00 | + \$ | 0.00 |
| Add a | Il other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | 2,122.00 |
| Calcul | late monthly income. Add line 7 + line 9. | 10. \$ | | 6,501.16 + \$ | 2.12 | 22.00 = \$ 8,623 |
| Add th | e entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | • | |
| Include other f | all other regular contributions to the expenses that you list in Schedule a contributions from an unmarried partner, members of your household, your riends or relatives. I include any amounts already included in lines 2-10 or amounts that are not a y: | depen | • | • | | chedule J. 11. +\$0. |
| | ne amount in the last column of line 10 to the amount in line 11. The rest hat amount on the Summary of Schedules and Statistical Summary of Certains | | | | | 12. \$ 8,623 . |

Official Form 106I Schedule I: Your Income page 2

monthly income

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 31 of 52

| Debtor 1 | Shelly A. Lall-P | ettit | Case number (if known) | |
|-----------------|---------------------------|--|------------------------|--|
| 13. Do : | you expect an inci No. | ease or decrease within the year after you file this form? | | |
| | Yes. Explain: | | | |

Official Form 106I Schedule I: Your Income page 3

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 32 of 52

| Fill | in this information to identify yo | our case: | | | | | |
|-----------|---|--------------------------|--|-----------------------|-----------------|-------------------|---|
| Deb | otor 1 Shelly A. La | II-Pettit | | | Check | t if this is: | |
| | | | | | _ | an amended filing | |
| 1 | otor 2 ouse, if filing) | | | | | | ving postpetition chapter the following date: |
| Unit | ted States Bankruptcy Court for the | : SOUTH | HERN DISTRICT OF NEW | YORK | | MM / DD / YYYY | |
| | | | | | | | |
| | se number nown) | | | | | | |
| | | | | | | | |
| O | fficial Form 106J | | | | | | |
| S | chedule J: Your | Exper | nses | | | | 12/15 |
| info | as complete and accurate as ormation. If more space is ne mber (if known). Answer eve | eded, atta ry questio | ch another sheet to this | | | | |
| Par 1. | t 1: Describe Your House Is this a joint case? | hold | | | | | |
| | ■ No. Go to line 2. □ Yes. Does Debtor 2 live | in a senar | ate household? | | | | |
| | □ No | ш а зера | ate flouseffold: | | | | |
| | Yes. Debtor 2 mus | st file Offic | al Form 106J-2, Expenses | for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have dependents? | □ No | | | | | |
| | Do not list Debtor 1 and Debtor 2. | ■ Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | | □ No |
| | dependents names. | | | Daughter | | | ■ Yes |
| | | | | Husband | | NA | □ No ■ Yes |
| | | | | | | | □ No |
| | | | | | | | Yes |
| | | | | | | | □ No |
| 3. | Do your expenses include | | No | | | | ☐ Yes |
| | expenses of people other t | han ${\sqsubset}$ | Yes | | | | |
| | <u> </u> | | _ | | | | |
| Est | t 2: Estimate Your Ongoi timate your expenses as of y penses as of a date after the plicable date. | our bankr | uptcy filing date unless y | | | | |
| | lude expenses paid for with value of such assistance an | | | | | | |
| (Of | ficial Form 106l.) | | | | | Your exp | enses |
| 4. | The rental or home owners payments and any rent for the | | • | nclude first mortgage | e 4. \$ | | 1,932.00 |
| | If not included in line 4: | | | | | | |
| | 4a. Real estate taxes | | | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, re | | | | 4c. \$ | | 250.00 |
| 5. | 4d. Homeowner's associaAdditional mortgage paym | | | me equity loans | 4d. \$ 5. \$ | | 0.00 975.00 |
| υ. | , wantional mortgage payin | ioi y | za coidonos, sucinas no | ino oquity loans | υ. ψ | | 313.00 |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 33 of 52

| btor 1 Shelly A. Lall-Pettit | Case number (if known) | |
|--|----------------------------------|-----------------------------|
| Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. \$ | 500.00 |
| 6b. Water, sewer, garbage collection | 6b. \$ | 0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 500.00 |
| 6d. Other. Specify: | 6d. \$ | 0.00 |
| Food and housekeeping supplies | 7. \$ | 1,000.00 |
| Childcare and children's education costs | 8. \$ | 175.00 |
| Clothing, laundry, and dry cleaning | 9. \$ | 200.00 |
| Personal care products and services | 10. \$ | 240.00 |
| Medical and dental expenses | 11. \$ | 200.00 |
| Transportation. Include gas, maintenance, bus or train fare. | | |
| Do not include car payments. | 12. \$ | 975.00 |
| Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 250.00 |
| Charitable contributions and religious donations | 14. \$ | 200.00 |
| Insurance. | | |
| Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. \$ | 282.00 |
| 15b. Health insurance | 15b. \$ | 0.00 |
| 15c. Vehicle insurance | 15c. \$ | 125.00 |
| 15d. Other insurance. Specify: | 15d. \$ | 0.00 |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: Internal Revenue Service | 16. \$ | 100.00 |
| Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a. \$ | 0.00 |
| 17b. Car payments for Vehicle 2 | 17b. \$ | 0.00 |
| 17c. Other. Specify: | 17c. \$ | 0.00 |
| 17d. Other. Specify: | 17d. \$ | 0.00 |
| Your payments of alimony, maintenance, and support that you did not report as | | 0.00 |
| deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | | 0.00 |
| Other payments you make to support others who do not live with you. | \$ | 0.00 |
| Specify: | 19. | |
| Other real property expenses not included in lines 4 or 5 of this form or on School 20a. Mortgages on other property | edule I: Your Income. 20a. \$ | 0.00 |
| 20b. Real estate taxes | 20a. \$ 20b. \$ | |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| | | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| 20e. Homeowner's association or condominium dues | 20e. \$ | 0.00 |
| Other: Specify: Food at work | 21. +\$ | 250.00 |
| Lawn care assistance & Pool care assistance | +\$ | 275.00 |
| Pet expenses vet care and food | +\$ | 120.00 |
| Daughter Karate | +\$ | 125.00 |
| Calculate your monthly expenses | | |
| 22a. Add lines 4 through 21. | \$ | 9 674 00 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | \$ | 8,674.00 |
| | · | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | \$ | 8,674.00 |
| Calculate your monthly net income. | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 8,623.16 |
| 23b. Copy your monthly expenses from line 22c above. | 23b\$ | 8,674.00 |
| 200. Copy your morning expenses normalic 220 above. | | 0,07 7.00 |
| 23c. Subtract your monthly expenses from your monthly income. | | |
| The result is your <i>monthly net income</i> . | 23c. \$ | -50.84 |
| | | |
| Do you expect an increase or decrease in your expenses within the year after your | | |
| For example, do you expect to finish paying for your car loan within the year or do you expect you | ir mortgage payment to incre | ease or decrease because of |
| modification to the terms of your mortgage? | | |
| ■ No. | | |
| ☐ Yes. Explain here: | | |

| ■ No. | |
|--------|---------------|
| ☐ Yes. | Explain here: |
| | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 34 of 52

| Fill in this inform | nation to identify your | case: | | |
|---------------------------------------|---|--------------------------|-------------------------------|--|
| Debtor 1 | Shelly A. Lall-Pet | tit | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | ☐ Check if this is an amended filing |
| Official Form | | ın Individual | Debtor's Sche | edules 12/15 |
| obtaining money years, or both. 18 | | n connection with a bank | | aking a false statement, concealing property, or nes up to \$250,000, or imprisonment for up to 20 |
| Did you pay ■ No | or agree to pay some | one who is NOT an attor | ney to help you fill out bank | cruptcy forms? |
| _ | lame of person | | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| | ty of perjury, I declare true and correct. | that I have read the sum | mary and schedules filed wi | ith this declaration and |
| | Ily A. Lall-Pettit | | X Signature of Deb | otor 2 |
| | A. Lall-Pettit e of Debtor 1 | | Signature of Deb | NOI Z |
| Date A | April 5, 2019 | | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 35 of 52

| Fill | in this inform | ation to identify your | case: | | | | | | |
|----------------|----------------------|---|--|-------------|---|--|---|--|--|
| Deb | tor 1 | Shelly A. Lall-Per First Name | Middle Name | L | _ast Name | | | | |
| Deb | tor 2 | | | | | | | | |
| (Spot | use if, filing) | First Name | Middle Name | L | ast Name | | | | |
| Unit | ed States Ban | kruptcy Court for the: | SOUTHERN DISTRICT | OF NEW | YORK | | | | |
| Cas (if kno | e number | | | | | _ | heck if this is an mended filing | | |
| Sta | | of Financial A | Affairs for Indivi | | | ankruptcy equally responsible for sup | 4/19 | | |
| | | ore space is needed,). Answer every ques | | this for | n. On the top of any | additional pages, write you | r name and case | | |
| Par | Give De | etails About Your Ma | rital Status and Where Yo | u Lived E | Before | | | | |
| 1. | What is your | current marital statu | s? | | | | | | |
| | ■ Married □ Not marr | ied | | | | | | | |
| 2. | During the la | st 3 years, have you | ived anywhere other than | where y | ou live now? | | | | |
| | ■ No □ Yes. List | ist all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | |
| | | | | | | ity property state or territory co, Texas, Washington and W | | | |
| | ■ No □ Yes. Mak | ke sure you fill out <i>Sch</i> | edule H: Your Codebtors (C | Official Fo | rm 106H). | | | | |
| Part | Explain | the Sources of You | Income | | | | | | |
| | Fill in the total | amount of income you | ployment or from operation received from all jobs and have income that you received. | all busine | esses, including part- | | dar years? | | |
| | □ No ■ Yes. Fill | in the details. | | | | | | | |
| | | | Debtor 1 | | | Debtor 2 | | | |
| | | | Sources of income Check all that apply. | (befo | s income re deductions and sions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| | | of current year until for bankruptcy: | ■ Wages, commissions, bonuses, tips | | \$11,082.27 | ☐ Wages, commissions, bonuses, tips | | | |
| | | | ☐ Operating a business | | | ☐ Operating a business | | | |

Official Form 107

Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document

| | helly A. Lall-Pettit | | Case | e number (if known) | |
|---|--|---|--|---|---|
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2018) | | ■ Wages, commissions, bonuses, tips | \$23,047.00 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |
| | ndar year before that: December 31, 2017) | ■ Wages, commissions, bonuses, tips | \$103,615.00 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |
| ■ No | . Fill in the details. | ncome from each source separa | iery. Do not include income tr | iai you iisteu iii iiile 4. | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | | | | | |
| Part 3: Lis | st Certain Payments Y | ou Made Before You Filed for | Bankruptcy | | |
| | er Debtor 1's or Debto Neither Debtor 1 no individual primarily fo | r 2's debts primarily consumer r Debtor 2 has primarily consumer r a personal, family, or househol | r debts? Imer debts. Consumer debts d purpose." | | 01(8) as "incurred by an |
| 6. Are eithe | er Debtor 1's or Debto Neither Debtor 1 no individual primarily fo | r 2's debts primarily consumer r Debtor 2 has primarily consumer or a personal, family, or househol refore you filed for bankruptcy, di | r debts? Imer debts. Consumer debts d purpose." | | 01(8) as "incurred by an |
| 6. Are eithe | Prescription 1's or Debtor 1's or Debtor 1 no individual primarily for During the 90 days border No. Go to ling Yes List below paid that | r 2's debts primarily consumer r Debtor 2 has primarily consumer or a personal, family, or househol refore you filed for bankruptcy, di | r debts? Imer debts. Consumer debts d purpose." d you pay any creditor a total d a total of \$6,825* or more in the for domestic support oblige | of \$6,825* or more? | the total amount you |
| 6. Are eithe | Pre Debtor 1's or Debtor Neither Debtor 1 no individual primarily for During the 90 days border No. Go to ling Yes List belo paid that not inclu | r 2's debts primarily consumer r Debtor 2 has primarily consumer a personal, family, or househol efore you filed for bankruptcy, die 7. w each creditor to whom you pai creditor. Do not include paymer | r debts? Imer debts. Consumer debts d purpose." d you pay any creditor a total d a total of \$6,825* or more in the for domestic support obligates bankruptcy case. | of \$6,825* or more? n one or more payments and tations, such as child support a | the total amount you and alimony. Also, do |
| 6. Are eithe | Preserved Preser | r 2's debts primarily consumer r Debtor 2 has primarily consumer a personal, family, or household efore you filed for bankruptcy, die 7. w each creditor to whom you paid creditor. Do not include payments to an attorney for the reditor to whom you for the payments to an attorney for the reditor. | r debts? Imer debts. Consumer debts Id purpose." d you pay any creditor a total d a total of \$6,825* or more in tts for domestic support oblig his bankruptcy case. Is after that for cases filed on Imer debts. | of \$6,825* or more? In one or more payments and to ations, such as child support a correct or after the date of adjustments. | the total amount you and alimony. Also, do |
| 6. Are eithe | Preserved Preser | r 2's debts primarily consumer r Debtor 2 has primarily consumer a personal, family, or household efore you filed for bankruptcy, die 7. w each creditor to whom you paid creditor. Do not include payment de payments to an attorney for the ent on 4/01/22 and every 3 years 2 or both have primarily consumeror you filed for bankruptcy, die registration. | r debts? Imer debts. Consumer debts Id purpose." d you pay any creditor a total d a total of \$6,825* or more in tts for domestic support oblig his bankruptcy case. Is after that for cases filed on Imer debts. | of \$6,825* or more? In one or more payments and to ations, such as child support a correct or after the date of adjustments. | the total amount you and alimony. Also, do |
| 6. Are eithe | Properties of Debtor 1's or Debtor 1 no individual primarily for During the 90 days be No. Go to lin Yes List belo paid that not inclu * Subject to adjustm Debtor 1 or Debtor During the 90 days be No. Go to lin Yes List belo include paid that not include paid tha | r 2's debts primarily consumer r Debtor 2 has primarily consumer a personal, family, or household efore you filed for bankruptcy, die 7. w each creditor to whom you paid creditor. Do not include payment de payments to an attorney for the ent on 4/01/22 and every 3 years 2 or both have primarily consumeror you filed for bankruptcy, die registration. | r debts? Imer debts. Consumer debts Id purpose." Id you pay any creditor a total Id a total of \$6,825* or more in Its for domestic support obligates bankruptcy case. Is after that for cases filed on Imer debts. Id you pay any creditor a total Id a total of \$600 or more and | of \$6,825* or more? In one or more payments and the ations, such as child support a consideration or after the date of adjustment of \$600 or more? | the total amount you and alimony. Also, do t. |

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
|-----------------------------|------------------|-------------------|----------------------|--|
| Chase Mortgage | monthly | \$6,885.21 | \$238,264.80 | ■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document

| | _ | Pg 37 of 52 | | |
|----------|-----------------------|-------------|------------------------|--|
| Debtor 1 | Shelly A. Lall-Pettit | | Case number (if known) | |
| | | | | |

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this pa | nyment for |
|-----|---|--|---|---|---|--|
| | Hudson Valley FCU 9 Mall Plaza 1810 South Rd, Suite 121 Wappingers Falls, NY 12590 | monthly | \$2,839.65 | \$123,510.85 | ■ Mortgage □ Car □ Credit Ca □ Loan Rep □ Suppliers □ Other | ard payment |
| 7. | Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony. | rtners; relatives of any ger control, or owner of 20% o | neral partners; partn or more of their votin | erships of which yog g securities; and a | ou are a genera ny managing a | al partner; corporations gent, including one for |
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider. Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi | | ments or transfer | any property on a | ccount of a d | ebt that benefited an |
| | No☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment litor's name |
| Par | t 4: Identify Legal Actions, Repossession | s and Foreclosures | • | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title | | | on suits, paternity a | | t or custody |
| | Case number | Company | Districts Count | Cummama | _ | |
| | Wells Fargo Bank, N.A. v. Shelly A. Pettit 501316/2018 | Consumer | Putnam Count Court 20 County Cer Carmel, NY 10 | nter | ■ Pending □ On appe □ Conclud | eal |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below | | erty repossessed, | foreclosed, garnis | shed, attached | d, seized, or levied? |
| | No. Go to line 11.☐ Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happened | d | | | property |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details. | | luding a bank or fi | nancial institutior | n, set off any a | amounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date | action was | Amount |
| | | | | taker | | |

Pg 38 of 52 Debtor 1 Shelly A. Lall-Pettit Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was Address payment **Email or website address** made Person Who Made the Payment, if Not You Francis J. O'Reilly Esq. Attorney Fees: \$2540.00 **Various** \$2,875.00 Court Fees: \$335.00 1961 Route 6 Carmel, NY 10512

Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59

Main Document

foreilly@verizon.net

19-35547-cgm

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 39 of 52

Debtor 1 Shelly A. Lall-Pettit

Case number (if known)

| 17. | promised to help you deal with your creditors Do not include any payment or transfer that you | n 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any prop sed to help you deal with your creditors or to make payments to your creditors? include any payment or transfer that you listed on line 16. | | half pay or transfer any prope | rty to anyone who |
|-----|---|---|-------------------------------|--|---|
| | ■ No □ Yes. Fill in the details. | | | | |
| | | 5 | | 5. | |
| | Person Who Was Paid Address | transferred | alue of any property | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankrupto | | | any property to anyone, othe | r than property |
| | Include both outright transfers and transfers madinclude gifts and transfers that you have already No | | | rity interest or mortgage on your | property). Do not |
| | Yes. Fill in the details. | | | | |
| | Person Who Received Transfer Address | Description and vo | ed j | Describe any property or payments received or debts paid in exchange | Date transfer was made |
| | Person's relationship to you | | ' | outu iii exonunge | |
| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prote- | | y property to a self- | settled trust or similar device | of which you are a |
| | No | | | | |
| | Yes. Fill in the details. | B | -1 | | Data Tanadan |
| | Name of trust | Description and v | alue of the property | transferred | Date Transfer was made |
| Par | List of Certain Financial Accounts, Inst | • | , | | |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ | other financial accour | its; certificates of d | | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | | Last 4 digits of account number | Type of account of instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ear before you filed for | bankruptcy, any sa | fe deposit box or other depos | itory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, St State and ZIP Code) | | cribe the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit or | place other than your | home within 1 year | before you filed for bankrupto | cy? |
| | ■ No □ Yes, Fill in the details. | | | | |
| | Name of Storage Facility | Who else has or h | ad access Des | cribe the contents | Do you still |
| | Address (Number, Street, City, State and ZIP Code) | to it? Address (Number, State and ZIP Code) | | one the contents | have it? |
| | | | | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 40 of 52

Debtor 1 Shelly A. Lall-Pettit Case number (if known)

| Address (Number, Street, City, State and ZIP Code) Chumber, Street, City, State and ZIP Code) Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Code Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Court or agency Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, C | Par | t 9: Identify Property You Hold or Control for | Someone Else | | | | |
|--|-----|---|--|--------------------------------------|-----------------------|--|--|
| Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) City (Number, Street, City, State and ZIP Code) | 23. | | one else owns? Include any proper | ty you borrowed from, are storing fo | or, or hold in trust | | |
| Owner's Name Address (Number, Stroet, City, State and ZIP Code) Where is the property? Address (Number, Stroet, City, State and ZIP Code) Where is the property? Address (Number, Stroet, City, State and ZIP Code) Environmental saw means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Ves. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, C | | | | | | | |
| Address (Number, Street, City, State and ZIP Code) Chumber, Street, City, State and ZIP Code) Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Code Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Court or agency Name of site Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Court or agency Name of Site Address (Number, Street, City, State and ZIP Code) Court or agency Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, C | | | | | | | |
| For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Size means any location, racility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | (Number, Street, City, State and ZIP | Describe the property | Value | | |
| Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Address (Number, Street, City, State and ZIP Code) Address (| Par | t 10: Give Details About Environmental Inform | ation | | | | |
| toxic substances, wastes, or material into the air, land, soli, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. No | For | the purpose of Part 10, the following definitions | apply: | | | | |
| to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | toxic substances, wastes, or material into the a | ir, land, soil, surface water, ground | - · | | | |
| Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | _ | | | law, whether you now own, operate, | or utilize it or used | | |
| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) | | , , | | s waste, hazardous substance, toxic | substance, | | |
| No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Date of notice | Rep | ort all notices, releases, and proceedings that ye | ou know about, regardless of wher | they occurred. | | | |
| Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) Address (LLP) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) A member of a limited liability company (LLC) or limited liability partnership (LLP) A member of a limited liability company (LLC) or limited liability partnership (LLP) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) A member of a limited liability company (LLC) or limited liability partnership (LLP) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) A member of a limited liability company (LLC) or limited liability partnership (LLP) Address (Number, Street, City, State and ZIP Code) Address | 24. | Has any governmental unit notified you that you | u may be liable or potentially liable | under or in violation of an environn | nental law? | | |
| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Part 11: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | Address (Number, Street, City, State and | | Date of notice | | |
| Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date of notice | 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | |
| Address (Number, Street, City, State and ZIP Code) No No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) | | _ | | | | | |
| No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Case Status of the case Case Vithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | Address (Number, Street, City, State and | | Date of notice | | |
| ☐ Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | 26. | Have you been a party in any judicial or admini | strative proceeding under any envi | ronmental law? Include settlements | and orders. | | |
| Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) | | _ | | | | | |
| 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | Name Address (Number, Street, City, | Nature of the case | | | |
| ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | Par | t 11: Give Details About Your Business or Con | nections to Any Business | | | | |
| ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | 27. | Within 4 years before you filed for bankruptcy. | did you own a business or have an | v of the following connections to ar | ny business? | | |
| ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | | | | | | | |
| □ A partner in a partnership | | ☐ A partner in a partnership | (===/ or miniou numity partitorism | ·F /— / | | | |
| ☐ An officer, director, or managing executive of a corporation | | | tive of a corporation | | | | |
| ☐ An owner of at least 5% of the voting or equity securities of a corporation | | <u>_</u> | - | | | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 41 of 52

Debtor 1 Shelly A. Lall-Pettit Case number (if known)

| | ■ No. None of the above applies. Go to F | Part 12. | |
|---------------------|---|---|---|
| | ☐ Yes. Check all that apply above and fill | in the details below for each business. | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. |
| | (Number, Street, City, State and 21r Code) | Name of accountant or bookkeeper | Dates business existed |
| 28. | Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No Yes. Fill in the details below. | cy, did you give a financial statement to an | nyone about your business? Include all financial |
| | Name | Date Issued | |
| | Address (Number, Street, City, State and ZIP Code) | | |
| Par | t 12: Sign Below | | |
| are t | | false statement, concealing property, or ol | declare under penalty of perjury that the answers of taining money or property by fraud in connection irs, or both. |
| /s/ | Shelly A. Lall-Pettit | | |
| | elly A. Lall-Pettit nature of Debtor 1 | Signature of Debtor 2 | |
| Dat | e April 5, 2019 | Date | |
| Did : ■ N □ Y | | ent of Financial Affairs for Individuals Filing | g for Bankruptcy (Official Form 107)? |
| Did : | you pay or agree to pay someone who is not | t an attorney to help you fill out bankruptcy | r forms? |

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 42 of 52

| Fill in this inform | nation to identify your | case: | | |
|---------------------------------|--|----------------------|--|--|
| Debtor 1 | Shelly A. Lall-Peti | it | | |
| Dahta a | First Name | Middle Name | Last Name | _ |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | - |
| United States Ba | nkruptcy Court for the: | SOUTHERN DIS | TRICT OF NEW YORK | |
| | . , | | | - |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| lf you are an indi | | oter 7, you must fil | viduals Filing Under Cha | pter 7 12/15 |
| You must file this | ver is earlier, unless th | ithin 30 days after | ot expired. you file your bankruptcy petition or by the da e time for cause. You must also send copies | |
| | eople are filing together and date the form. | in a joint case, bo | th are equally responsible for supplying corr | ect information. Both debtors must |
| write ye | our name and case nun | nber (if known). | s needed, attach a separate sheet to this form | n. On the top of any additional pages, |
| | - | | : Creditors Who Have Claims Secured by Pro | pperty (Official Form 106D), fill in the |
| | editor and the property the | nat is collateral | What do you intend to do with the propert secures a debt? | y that Did you claim the property as exempt on Schedule C? |
| | | | | |
| Creditor's C | hase Mortgage | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | = |
| Description of | 359 Allview Ave Br | ewster, NY | ☐ Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property securing debt: | 10509-3410 Putna | m County | Retain the property and [explain]: Keep Current | |
| Creditor's H | udaan Vallay FOU | | По 1 и | П., |
| name: | udson Valley FCU | | ☐ Surrender the property.☐ Retain the property and redeem it. | □ No |
| Description of | 359 Allview Ave Br | owster NV | ☐ Retain the property and enter into a | ■ Yes |
| property | 10509-3410 Putna | | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | | - | keep current | |
| Creditor's K | ahana Villa | | ■ Surrender the property. | ■ No |
| name: | | | Retain the property and redeem it. | _ 110 |
| Description of | | na, HI 96761 | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | Maui County | | ☐ Retain the property and [explain]: | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 43 of 52

| Debtor 1 | Shelly A. Lall-Pettit | Case number (if known) | |
|-------------|--|--|---------------------------------|
| securin | ng debt: | | _ |
| | List Your Unexpired Personal Property Lo | | (9%) 15 (9%) (11) |
| in the info | rmation below. Do not list real estate leas | listed in Schedule G: Executory Contracts and Unexpired less. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2) | lease period has not yet ended. |
| Describe | your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's r | name: on of leased | | □ No |
| Property: | | | ☐ Yes |
| Lessor's r | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's r | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's r | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's r | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's r | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's r | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Part 3: | Sign Below | | |
| | nalty of perjury, I declare that I have indica | ated my intention about any property of my estate that sec | cures a debt and any personal |
| | Shelly A. Lall-Pettit | x | |
| | elly A. Lall-Pettit ature of Debtor 1 | Signature of Debtor 2 | |
| Date | April 5, 2019 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|----------|-------|--------------------|
| + | \$75 | administrative fee |
| <u> </u> | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 48 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of New York

| In r | e Shelly A. Lall-Pettit | | Case No. | | |
|------|---|---|----------------------|----------------------|-----------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COME | PENSATION OF ATTORN | NEY FOR DE | EBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplati | filing of the petition in bankruptcy, or | r agreed to be paid | to me, for services | |
| | For legal services, I have agreed to accept | | . \$ | 2,540.00 | |
| | Prior to the filing of this statement I have receive | | | 2,540.00 | |
| | Balance Due | | | 0.00 | |
| 2. | \$335.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed co | ompensation with any other person un | nless they are mem | bers and associates | of my law firm. |
| | ☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the | | | | law firm. A |
| 6. | In return for the above-disclosed fee, I have agreed t | o render legal service for all aspects of | of the bankruptcy of | case, including: | |
| | a. Analysis of the debtor's financial situation, and reb. Preparation and filing of any petition, schedules,c. Representation of the debtor at the meeting of cred. [Other provisions as needed] | statement of affairs and plan which m | nay be required; | - | kruptcy; |
| 7. | By agreement with the debtor(s), the above-disclosed Amendment of the petition, schedule | es or statements, filing fees, cre | | | |
| | | CERTIFICATION | | | |
| this | I certify that the foregoing is a complete statement of bankruptcy proceeding. | f any agreement or arrangement for pa | ayment to me for r | epresentation of the | debtor(s) in |
| | April 5, 2019 | /s/ Francis J. O'Rei | lly | | |
| 1 | Date | Francis J. O'Reilly | | | |
| | | Signature of Attorney Francis J. O'Reilly | Fsa | | |
| | | 1961 Route 6 | Loq. | | |
| | | Carmel, NY 10512 | (- (-) | _ | |
| | | (845) 225-5800 Fax foreilly@verizon.ne | | Ö | |
| | | Name of law firm | | | |

19-35547-cgm Doc 1 Filed 04/08/19 Entered 04/08/19 10:24:59 Main Document Pg 49 of 52

United States Bankruptcy Court Southern District of New York

| | | | |
|--------------------------------------|---|-----------------------|-----------------------|
| n re Shelly A. Lall-Pettit | Debtor(s) | Case No. Chapter | 7 |
| | Desicits | Chapter | |
| | | | |
| VER | IFICATION OF CREDITOR | MATRIX | |
| VER | | 111 21 1 1121 | |
| | | | |
| | | | |
| e above-named Debtor hereby verifies | that the attached list of creditors is true and | l correct to the best | of his/her knowledge. |
| | | | |
| 4 11 5 0040 | / / OL . II. A. L. II. D. 455 | | |
| ate: April 5, 2019 | /s/ Shelly A. Lall-Pettit | | _ |
| | Shelly A. Lall-Pettit | | |
| | Signature of Debtor | | |

ALLIED INTERSTATE P.O. BOX 361445 COLUMBUS, OH 43236

ALLTRAN FINANCIAL, LP PO BOX 4044 CONCORD, CA 94524-4044

BARCLAYS PO BOX 13337 PHILADELPHIA, PA 19101-3337

BARCLAYS BANK DELAWARE LL BEAN 100 WEST STREET WILMINGTON, DE 19801

CAPITAL MANAGEMENT SERVICES, L 698 1/2 SOUTH OGDEN STREET BUFFALO, NY 14206-2317

CHASE PO BOX 15298 WILMINGTON, DE 19850-5298

CHASE MORTGAGE

CITI CARDS PO BOX 790345 SAINT LOUIS, MO 63179-0345

CREDIT CONTROL, LLC PO BOX 31179 TAMPA, FL 33631

HOME DEPOT (P)
CITIBANK NA
701 EAST 60TH STREET NORTH
SIOUX FALLS, SD 57117

HUDSON VALLEY FCU
POST OFFICE BOX 1071
POUGHKEEPSIE, NY 12602-1071

HUDSON VALLEY FCU 9 MALL PLAZA 1810 SOUTH RD, SUITE 121 WAPPINGERS FALLS, NY 12590

KAHANA VILLA 4242 LOWER HONOAPIILANI RD LAHAINA, HI 96761

KOHL'S PO BOX 3043 MILWAUKEE, WI 53201-3043

MACY DSNB PO BOX 8218 MASON, OH 45040

MIDLAND FUNDING LLC
PO BOX 301030
LOS ANGELES, CA 90030-1030

NYG&E 535 CONNECTICUT AVE 6TH FLOOR NORWALK, CT 06854

PORTFOLIO RECOVERY ASSC., LLC 120 CORPORATE BLVD. NORFOLK, VA 23502

SYNCHRONY BANK PO BOX 960061 ORLANDO, FL 32896-0061

SYNCHRONY BANK - JC PENNEY PO BOX 960061 ORLANDO, FL 32896-0061

SYNCHRONY BANK - PEARLE VISION PO BOX 960061 ORLANDO, FL 32896-0061

SYNCHRONY BANK - TOYS R US PO BOX 960061 ORLANDO, FL 32896-0061

SYNCHRONY BANK /JCP PO BOX 965009 ORLANDO, FL 32896-0090

TENAGLIA & HUNT, PA 395 W. PASSAIC STREET, SUITE 2 ROCHELLE PARK, NJ 07662

U.S. GAS & ELECTRIC PO BOX 10162 UNIONDALE, NY 11555-0162

UNITED COLLECTION BUREAU 5620 SOUTHWYCK BLVD. STE. 206 TOLEDO, OH 43614

WELLS FARGO BANK NA PO BOX 95225 ALBUQUERQUE, NM 87199-5225

WELLS FARGO CARD SERVICES PO BOX 10347 DES MOINES, IA 50306-0347